

Patient Information	Specimen Information	Client Information
<b>DOB:</b> <b>AGE:</b> Gender: Phone: Patient ID:	Specimen: Requisition: Lab Ref #: Collected: Received: Reported:	

**COMMENTS:**

Test Name	In Range	Out Of Range	Reference Range	Lab
COMPREHENSIVE METABOLIC PANEL				
GLUCOSE	85		65-139 mg/dL	
			Non-fasting reference interval	
UREA NITROGEN (BUN)	8		7-25 mg/dL	
CREATININE	0.87		0.50-1.10 mg/dL	
eGFR NON-AFR. AMERICAN	79		> OR = 60 mL/min/1.73m <sup>2</sup>	
eGFR AFRICAN AMERICAN	92		> OR = 60 mL/min/1.73m <sup>2</sup>	
BUN/CREATININE RATIO	NOT APPLICABLE		6-22 (calc)	
SODIUM	140		135-146 mmol/L	
POTASSIUM	4.2		3.5-5.3 mmol/L	
CHLORIDE	107		98-110 mmol/L	
CARBON DIOXIDE	24		20-32 mmol/L	
CALCIUM	9.1		8.6-10.2 mg/dL	
PROTEIN, TOTAL	7.8		6.1-8.1 g/dL	
ALBUMIN	3.8		3.6-5.1 g/dL	
<b>GLOBULIN</b>		<b>4.0 H</b>	1.9-3.7 g/dL (calc)	
ALBUMIN/GLOBULIN RATIO	1.0		1.0-2.5 (calc)	
BILIRUBIN, TOTAL	0.8		0.2-1.2 mg/dL	
ALKALINE PHOSPHATASE	50		33-115 U/L	
AST	15		10-35 U/L	
ALT	10		6-29 U/L	

**PERFORMING SITE:**